## IN THE UNITED STA

Applicant:

Gerald A. Reine

Application No.:

10/664,348

Group:

2643

AND TRADEMARK OFFICE

Filed:

September 17, 2003

Examiner:

George Eng

Confirmation No.:

4152

For:

CHECK FOR PENDING E-MAIL USING CALLER ID AND

SELECTIVE ANSWER RING

## CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

> 7-28-04 Date

Signature

Typed or printed name of person signing certificate

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Reply for filing in the above-identified application.

- Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

**MINUS** 

**MINUS** 

FIRST PRESENTATION OF MULTIPLE DEP. CLAIM

(COL. 1)

CLAIMS

REMAINING

**AFTER** 

**AMENDMENT** 

13

(COL. 2)

HIGHEST NO.

**PREVIOUSLY** 

PAID FOR

20

4

(COL. 3)

**PRESENT** 

**EXTRA** 

0

0

11	
11	
И	
ll .	
II	ADDIT.
li .	ADDIT.

**SMALL ENTITY** 

R.	АТЕ	ADDIT. FEE
x	\$ 9	\$
x	\$43	\$
+	\$145	\$

OTHER THAN **SMALL ENTITY** 

R	ATE	l .	ODIT. FEE
x	\$18	\$	0
х	\$86	\$	0
+	\$290	\$	

<u>OR</u>

not fewer than 20

not fewer than 3

**TOTAL** 

INDEP

TOTAL =

TOTAL =

payment of the following fees:  or [ ] month Extension of Time \$			a dimini di cons		Φ	
payment of the following fees:  or [ ] month Extension of Time	[ ]	Petition for [	] month Extension of Time		\$	
payment of the following fees:  or [ ] month Extension of Time \$	[ ]	Amendment Fee			\$	
TOTAL: \$	[ ]	Other Fees:				
payment of the following fees:  or [ ] month Extension of Time					\$	
payment of the following fees:  or [ ] month Extension of Time		2000			\$	***
or [ ] month Extension of Time \$				TOTAL:	\$	0
ent Fee \$	check is	enclosed in payment	of the following fees:			
sinal Disclaimer \$ 110 \$ TOTAL: \$ 110	[]	Petition for [	] month Extension of Time		\$	
\$ 110 \$ TOTAL: \$ 110	[ ]	Amendment Fee			\$	
* TOTAL: \$ 110	[X]	Other Fees:				
TOTAL: \$ 110		Terminal Disc	laimer		\$	110
					-	
				TOTAL:	- <u> </u>	110
aired under 37 C.F.R. 1.16 and 1.17 in order to maintain pendence					\$ \$ \$	2(
	for a	ny fees required unde	er 37 C.F.R. 1.16 and 1.17 in order t	o maintain p	enden	cy of
Respectfully submitted,	for a	ny fees required unde	of this authorization is enclosed for	o maintain p	enden	cy of
	for a	ny fees required unde	or 37 C.F.R. 1.16 and 1.17 in order to f this authorization is enclosed for Respectfully submitted,	o maintain paccounting p	oenden ourpos	cy of es.

Concord, Massachusetts 01742-9133 Dated: 7/28/04